

Message Text

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PAGE 01 TUNIS 00853 051735Z

15

ACTION OES-05

INFO OCT-01 NEA-10 IO-11 ISO-00 AID-05 HEW-06 L-03 COME-00

/041 W

----- 067347

R 051505Z FEB 76

FM AMEMBASSY TUNIS

TO SECSTATE WASHDC 1609

INFO USMISSION GENEVA

USMISSION USUN

UNCLAS TUNIS 0853

E.O. 11652: N/A

TAGS: SPOP, EGEN, TBIO,XX

SUBJ: OVERVIEW OF AVS CONFERENCE, TUNIS, FEB 1-4

REF: STATE 16503

FOLLOWING IS REPORT FROM MARY M. HASELTON, SPECIAL ASSISTANT TO COORDINATOR OF POPULATION AFFAIRS, STATE DEPT, RE THIRD INTERNATIONAL CONFERENCE OF ASSOCIATION FOR VOLUNTARY STERILIZATION, TUNIS:

1. LEADERS IN FAMILY PLANNING, 280 PHYSICIANS AND NON-PHYSICIANS, ATTENDED THIRD INTERNATIONAL AVS CONFERENCE. CONFERENCE, HELD AT TUNIS HILTON, WAS CO-HOSTED BY TUNISIAN MINISTRY OF HEALTH IN COOPERATION WITH INTERNATIONAL FEDERATION OF GYNECOLOGY AND OBSTETRICS AND THE INTERNATIONAL FEDERATION OF FERTILITY SOCIETIES.

2. TUNISIA HAS A GOVERNMENT PROGRAM ON FAMILY PLANNING WITHIN THE MINISTRY OF HEALTH AND HAS NO LEGAL BARRIERS TO ANY METHOD OF FERTILITY CONTROL, INCLUDING ABORTION. OFFICIAL WELCOME GIVEN BY MINISTER OF NATIONAL DEFENSE ON BEHALF MINISTER OF HEALTH STRESSED A DIVERSIFIED APPROACH TO FAMILY PLANNING GENERALLY IN THE CONTEXT OF A TOTAL SOCIO-ECONOMIC BASE, INCLUDING ECONOMIC DEVELOPMENT, THE PROTECTION OF THE HEALTH OF THE MOTHER, THE CHILD, AND THE FAMILY, WITH UNCLASSIFIED

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FULL EMPHASIS ON EQUAL STATUS OF WOMEN, LEGALLY PRESENT IN

TUNIS SINCE 1956.

3. CONFEREES EXPRESSED A RANGE OF EXPECTATIONS FOR FUTURE ROLE OF STERILIZATION AS THE MOST EFFECTIVE MEANS OF CONTRACEPTION WHEN DESIRED FAMILY SIZE IS REACHED. MAJORITY VIEW APPEARED TO CENTER ON FOLLOWING THEMES AND CRITERIA:

(A) STERILIZATION AS YET IS AN IRREVERSIBLE PROCESS AND MUST BE FULLY UNDERSTOOD AND ACCEPTED AS SUCH.

(B) AS WITH OTHER FORMS OF CONTRACEPTION, INDIVIDUALS SHOULD BE PROVIDED FULL INFORMATION AND ACCESS TO STERILIZATION PROCEDURES, SO THAT FREE CHOICE IS EXERCISED IN THE CONTROL OF PERSONAL FERTILITY.

(C) STERILIZATION PROCEDURES MUST BE AN INTEGRAL PART OF SOUND MEDICAL CARE AND PRACTICE AT ALL TIMES AND IN ALL PLACES, REQUIRING THE HIGHEST MEDICAL STANDARDS AND MOST COMPLETE AND COMPETENT SERVICES AVAILABLE BEFORE, DURING, AND AFTER SURGERY.

(D) EXTREME CARE SHOULD BE GIVEN TO THE MOTIVATIONAL AND EDUCATIONAL PREPARATION OF ACCEPTORS WITH LONG LEAD-TIME PRIOR TO PERFORMANCE OF SURGERY. ACCEPTORS MUST FULLY UNDERSTAND THAT VOLUNTARY STERILIZATION IS A FINAL STEP IN A SERIES OF CONTRACEPTIVE MEASURES AVAILABLE.

(E) THERE IS AN URGENT NEED TO MAKE SIMPLIFIED BUT QUALITATIVE SERVICES AVAILABLE TO PEOPLE IN RURAL AREAS, EXTENDING SUCH SERVICES THROUGH COMPETENT TRAINING BY PHYSICIANS OF MIDWIVES, NURSES, AND PARAMEDICS, AS APPROPRIATE TO LOCAL SETTINGS AND ALWAYS WITH ADEQUATE PHYSICIAN SUPERVISION AVAILABLE ON CALL.

(F) THERE SHOULD BE ADEQUATE COMPENSATION TO PHYSICIANS, TECHNICAL, AND EDUCATIONAL STAFF, OTHERWISE THEY WILL NOT BE FULLY MOTIVATED TO PARTICIPATE IN DELIVERY OF INTEGRATED FAMILY PLANNING AND HEALTH SYSTEMS.

(G) INCENTIVES AND DISINCENTIVES TO ACCEPTORS DESIRABLE
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AS LONG AS THEY REMAIN A PART OF VOLUNTARISM.

(H) EFFORTS TO REMOVE LEGAL, SOCIO-CULTURAL, RELIGIOUS, AND POLITICAL BARRIERS MUST CONTINUE.

4. CONFERENCE MAINTAINED MOOD OF CONFIDENCE AND PRAGMATIC OPTIMISM. PRIMARY CRITICISM HEARD IN CORRIDORS WAS COMPLETE LACK OF SCHEDULED TIME IN PLENARY FOR DISCUSSION. MONOGRAPH

OF SOME 5 PLENARY PRESENTATIONS AND SUMMARY OF 21 WORKSHOPS
WILL BE AVAILABLE.

5. DR. NAFIS SADIK OF UNITED NATIONS FUND FOR POPULATION
ACTIVITIES WAS PRESENTED HUGH MOORE AWARD FOR HER OUTSTANDING
WORK DURING WORD POPULATION YEAR AND INTERNATIONAL WOMEN'S
YEAR.

6. COMMENT: PRIMARY ACHIEVEMENT MAY BE REINFORCEMENT OF
RESPECTABILITY OF SUBJECT IN MINDS OF PARTICIPANTS AS THEY
RETURN TO HOME COUNTRIES AND CONFRONT DEMOGRAPHIC AND HEALTH
COMPONENTS OF DEVELOPMENTAL GOALS.

7. DEPT MAY WISH TO DISTRIBUTE REPORT TO OTHER APPROPRIATE
POSTS.
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Message Attributes

Automatic Decaptioning: X
Capture Date: 01 JAN 1994
Channel Indicators: n/a
Current Classification: UNCLASSIFIED
Concepts: FAMILY PLANNING, MEETING REPORTS
Control Number: n/a
Copy: SINGLE
Draft Date: 05 FEB 1976
Decaption Date: 01 JAN 1960
Decaption Note:
Disposition Action: n/a
Disposition Approved on Date:
Disposition Authority: n/a
Disposition Case Number: n/a
Disposition Comment:
Disposition Date: 01 JAN 1960
Disposition Event:
Disposition History: n/a
Disposition Reason:
Disposition Remarks:
Document Number: 1976TUNIS00853
Document Source: CORE
Document Unique ID: 00
Drafter: n/a
Enclosure: n/a
Executive Order: N/A
Errors: N/A
Film Number: D760045-0321
From: TUNIS
Handling Restrictions: n/a
Image Path:
ISecure: 1
Legacy Key: link1976/newtext/t19760277/aaaacpod.tel
Line Count: 131
Locator: TEXT ON-LINE, ON MICROFILM
Office: ACTION OES
Original Classification: UNCLASSIFIED
Original Handling Restrictions: n/a
Original Previous Classification: n/a
Original Previous Handling Restrictions: n/a
Page Count: 3
Previous Channel Indicators: n/a
Previous Classification: n/a
Previous Handling Restrictions: n/a
Reference: 76 STATE 16503
Review Action: RELEASED, APPROVED
Review Authority: ElyME
Review Comment: n/a
Review Content Flags:
Review Date: 17 JUN 2004
Review Event:
Review Exemptions: n/a
Review History: RELEASED <17 JUN 2004 by oatisao>; APPROVED <15 DEC 2004 by ElyME>
Review Markings:

Margaret P. Grafeld
Declassified/Released
US Department of State
EO Systematic Review
04 MAY 2006

Review Media Identifier:
Review Referrals: n/a
Review Release Date: n/a
Review Release Event: n/a
Review Transfer Date:
Review Withdrawn Fields: n/a
Secure: OPEN
Status: NATIVE
Subject: OVERVIEW OF AVS CONFERENCE, TUNIS, FEB 1-4
TAGS: SPOP, EGEN, TBIO, XX, TS
To: STATE
Type: TE
Markings: Margaret P. Grafeld Declassified/Released US Department of State EO Systematic Review 04 MAY 2006